

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	2/2/01
FORMALITY REVIEW	H.T	913	02/16/01
RESPONSE FORMALITY REVIEW	R.B	1018	04/20/01
	MA	876	06/12/01
		1110	8-1-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	6/6/02 6/6/03
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Claim	Date
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Claim	Date
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